

Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
Community Policy Management Section

SDFSCA Governor's Prevention Services Monthly Summary of Non-UCR Activities: SFY 03-04

Area Program/LME	Contract Agency (if applicable)	Name & Signature of Person Completing Summary	Date Submitted
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Summary Period (Check ☒ one): ___Jan/04 ___Feb/04 ___Mar/04 ___Apr/04 ___May/04 ___Jun/04

Instructions: Substance Abuse Prevention Programs are those directed at individuals who do not require treatment for substance abuse. Such programs are aimed at educating and advising individuals on such abuse and providing for designated non-treatment activities to reduce the risk of such abuse. The SDFSCA Governor's Prevention Services Monthly Summary of Non-UCR Activities is to be completed for all Direct and Indirect Service activities provided by designated Child Substance Abuse Prevention staff whose positions and expenditures are being reimbursed through the SDFSCA funds. Summary is to be submitted on the 10th of each month following the month summarized. For example, the January 2004 Summary is due on February 10, 2004. **Submit to Dr. Janice Petersen, Prevention/Early Intervention Team, at 3021 Mail Service Center, Raleigh, NC 27699-3021, or at Janice.Petersen@ncmail.net.** For questions, contact Dr. Petersen at (919) 715-5989. (Electronic copy of form is available upon request. As necessary, form may be duplicated).

Name of Approved Evidence-Based CSA <u>Selective</u> Program(s) Being Implemented		CSA Prevention Program Category (Check <input checked="" type="checkbox"/> one per program)							
		Promising	Effective	Model					
1.									
2.									
3.									
Printed Name of Each Designated CSA Prevention Professional Supported Through SDFSCA Governor's Prevention Funds	Monthly Total No. of Hrs. of Each Staff Position Reim-bursed through SDFSCA Gov. Prev. Funds	No. of Designated CSA Prevention Staff Hours Utilized in <u>Provision of Direct Service Prevention Activities</u> (Documented in either the <u>Client Record</u> or in the <u>Service Record</u> for Consultation, Education, and Primary Prevention)				No. of Designated CSA Prevention Staff Hours Utilized in <u>Completion of Indirect Service Prevention Activities</u>			
		# Hrs. Provided in CSA Prevention to Children and/or Adolescents (H0001, H0002, H0025, YP110)	# Hrs. Provided in CSA Prevention to Parents and/or Residential Caregivers (H0001, H0002, H0025, YP110)	# Hrs. Provided in CSA Prevention to All Other Individuals (YP110)	# Hrs. in Travel to Provide CSA Prevention Services (YP498, YP499)	# Hrs. of CSA Prevention Program Planning and/or Preparation	# Hrs. of CSA Prevention Services Documen-tation and/or Evaluation Activities	# Hrs. of CSA Prevention Staff in Providing or Receiving Prevention Staff Supervision and/or Training	# Hrs. of All Other CSA Prevention Indirect Service Activities
<i>Example: Al Jackson</i>	160	50	20	10	8	40	20	10	2

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